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## BIB DATA SHEET

CONFIRMATION NO. 2953

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.    |
|--|---|--|---|---------------------------|
| 10/520,259   | 09/12/2005<br>RULE  | 123  | 3752  | DP-308435                 |
| <b>APPLICANTS</b><br>Anthony Thomas Harcombe, Surrey, UNITED KINGDOM;<br>Anthony John Williams, Middlesex, UNITED KINGDOM;<br>Andy Male, Walton on Thames, UNITED KINGDOM; |   |  |   |                           |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/GB03/02668 06/20/2003  |   |  |   |                           |
| <b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 0215490.4 07/04/2002  |   |  |   |                           |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>   |   |  |   |                           |
| Foreign Priority claimed<br>35 USC 119(a-d) conditions met<br>Verified and /TREVOR EDWIN<br>Acknowledged MCGRAW/<br>Examiner's Signature                                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Met after Allowance<br>TEM<br>Initials | STATE OR<br>COUNTRY<br><br>UNITED<br>KINGDOM | SHEETS<br>DRAWINGS<br><br>4   | TOTAL<br>CLAIMS<br><br>15 |
|  |   |  | INDEPENDENT<br>CLAIMS<br><br>1  |                           |
| <b>ADDRESS</b><br>Delphi Technologies, Inc.<br>M/C 480-410-202<br>PO BOX 5052<br>Troy, MI 48007<br>UNITED STATES   |   |  |   |                           |
| <b>TITLE</b><br>Control valve arrangement  |   |  |   |                           |
| <b>FILING FEE<br/>RECEIVED</b><br>1030   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:   |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |